

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10800982

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 4            |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 4 minus 20=  | * 0                      |
| INDEPENDENT CLAIMS               | 4 minus 3 =  | * 1                      |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |                          | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|--------------------------|------------------------------------|---------------|
|  | Total                            | *                        | Minus                              | ** =          |
| Independent                                    | *                                | Minus                    | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  | <input type="checkbox"/> |                                    |               |

SMALL ENTITY  
TYPE

OTHER THAN  
OR SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEES   |
| BASIC FEE | 385.00 |
| X\$ 9=    |        |
| X43=      |        |
| +145=     |        |
| TOTAL     |        |

|           |        |
|-----------|--------|
| RATE      | FEES   |
| BASIC FEE | 770.00 |
| XS18=     |        |
| X86=      | 86     |
| +290=     |        |
| TOTAL     |        |

SMALL ENTITY OR

OTHER THAN  
SMALL ENTITY

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT |                          | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|--------------------------|------------------------------------|---------------|
|  | Total                            | *                        | Minus                              | ** =          |
| Independent                                    | *                                | Minus                    | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  | <input type="checkbox"/> |                                    |               |

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |                          | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|--------------------------|------------------------------------|---------------|
|  | Total                            | *                        | Minus                              | ** =          |
| Independent                                    | *                                | Minus                    | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  | <input type="checkbox"/> |                                    |               |

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.